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http://8000/preexam/JavaProxy/jsp/bibdata/transform.jsp

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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 1803

SERIAL NUMBER 09/717,533	FILING DATE 11/21/2000  RULE	CLASS 717	GROUP ART UNIT 2124	ATTORNEY DOCKET NO. 777.351US1
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NO

P17

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NO

PH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	WA	3	24	7
Verified and Acknowledged	Examiner's Signature PH	Initials PH		

## ADDRESS

Steven J Rocci  
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Mackiewicz & Norris LLP  
One Liberty Place 46th Floor  
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19103

## TITLE

Extensible architecture for versioning APIs

FILING FEE  RECEIVED 1102	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 1803

<b>SERIAL NUMBER</b> 09/717,533	<b>FILING DATE</b> 11/21/2000 <b>RULE</b>	<b>CLASS</b> 707	<b>GROUP ART UNIT</b> 2171	<b>ATTORNEY DOCKET NO.</b> 777.351US1
<b>APPLICANTS</b> Bradley J. Bartz, Lynnwood, WA; Michael R. Santoro, Svallingford, WA; Christopher G. Kaler, Redmond, WA; Zachary L. Anderson, Redmond, WA; Christopher D. Reeves, Redmond, WA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 03/22/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 24
				<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> Schwegman, Lundberg, Woessner & Kluth, P.A. P.O. Box 2938 Minneapolis, MN 55402				
<b>TITLE</b> Extensible architecture for versioning APIs				
<b>FILING FEE RECEIVED</b> 1102	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	